FOR INSTRUCTIONS, SEE BACK OF FORM
This form is not applicable to statutory political committees.

## **Notice of Dissolution**

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

(Rev. 02/96)

## **COMMITTEE NAME**

" 500V	Official Name of Committee		
JAN 1-15.04	BLOCK FOR CITY COUNCIL Street		
2 W. 1.12	Street		
ζ.	3106 NE BRIARWOOD DR		
	City, State, Zip Code		
	ANKENY IA 50021-9665		
* <b>a</b> *	Area Telephone Code		
	1515 964-5694		
	Effective date of dissolution:		
	1-15-04 1804		
••	Lat Brewbaker		
	Signature of Treasurer		
	1./15/04		
	Date Signed		

THIS BOX APPLIES TO CANDIDATES	' COMMITTEES ONLY
--------------------------------	-------------------

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Signature of Candidate - Required for Candidate's Committee

Date signed

## WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.